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PTO/SB/05 16

Approved for use through 10/31/2002 OMB 0651-0002

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UTILITY PATENT APPLICATION TRANSMITTAL <i>(Only for new nonprovisional applications under 37 CFR 1.53(b))</i>		Attorney Docket No.	3672/86512
		First Inventor	Kim, Hyun S.
		Title	SUPPLEMENTAL RESTRAINT SYSTEM
		Express Mail Label No.	EL854693179US

APPLICATION ELEMENTS <i>See MPEP chapter 600 concerning utility patent application contents.</i>		ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, D.C. 20231	
1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <i>(Submit an original, and a duplicate for fee processing)</i>			
2. <input checked="" type="checkbox"/> Applicant claims small entity status. <i>See 37 CFR 1.27.</i>			
3. <input checked="" type="checkbox"/> Specification <i>[Total Pages</i> 20 <i>]</i> <i>(preferred arrangement set forth below)</i> <ul style="list-style-type: none"> - Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings <i>(if filed)</i> - Detailed Description - Claim(s) - Abstract of the Disclosure 			
4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) <i>[Total Sheets</i> 8 <i>]</i>			
5. Oath or Declaration <i>[Total Pages</i> 2 <i>]</i> <ul style="list-style-type: none"> a. <input checked="" type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <i>(for continuation/divisional with Box 18 completed)</i> <ul style="list-style-type: none"> i. <input type="checkbox"/> DELETION OF INVENTOR(S) <i>Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</i> 			
6. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76			
7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program <i>(Appendix)</i>			
8. Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i> <ul style="list-style-type: none"> a. <input type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on: <ul style="list-style-type: none"> i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> paper c. <input type="checkbox"/> Statements verifying identity of above copies 			
ACCOMPANYING APPLICATION PARTS			
9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))			
10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney <i>(when there is an assignee)</i>			
11. <input type="checkbox"/> English Translation Document <i>(if applicable)</i>			
12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations			
13. <input type="checkbox"/> Preliminary Amendment			
14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i>			
15. <input type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i>			
16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.			
17. <input type="checkbox"/> Other:			

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

Continuation Divisional Continuation-in-part (CIP) of prior application No.: **09/968,066**

Prior application information: Examiner **3611** Group / Art Unit: **3611**

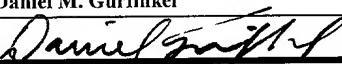
For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

Customer Number or Bar Code Label Correspondence address below
(Insert Customer No. or Attach bar code label here)

Name	Daniel M. Gurfinkel				
Address	WELSH & KATZ, LTD. 120 S. Riverside Plaza, 22nd Floor				
City	Chicago	State	Illinois	Zip Code	60606
Country	US	Telephone	312-655-1500	Fax	312-655-1501

Name (Print/Type) **Daniel M. Gurfinkel** Registration No. (Attorney/Agent) **34,177**

Signature  Date **2/26/02**

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FEE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

 Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

\$397.00

Complete if Known

Application Number	
Filing Date	
First Named Inventor	Kim, Hyun S.
Examiner Name	
Group Art Unit	
Attorney Docket No.	3672/86512

METHOD OF PAYMENT (check all that apply)

 Check Credit card Money Order Other None
 Deposit Account:

Deposit Account Number **23-0920**

Deposit Account Name **WELSH & KATZ, LTD.**

The Commissioner is authorized to: (check all that apply)

Charge fee(s) indicated below Credit any overpayments

Charge any additional fee(s) during the pendency of this application

Charge fee(s) indicated below, except for the filing fee to the above identified deposit account

FEE CALCULATION

1. BASIC FILING FEE

Large Entity	Small Entity	Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
101 740	201 370	Utility filing fee		370.00	
106 330	206 165	Design filing fee			
107 510	207 255	Plant filing fee			
108 740	208 370	Reissue filing fee			
114 160	214 80	Provisional filing fee			
SUBTOTAL (1)				\$370.00	

2. EXTRA CLAIM FEES FOR UTILITY AND

Extra Claims	Fee from below	Fee Paid
Total Claims 23	-20** = 3	X 9.00 = 27.00
Independent Claims 3	-3*** = 0	X 0 = 0.00
Multiple Dependent		

Large Entity	Small Entity	Fee Code (\$)	Fee Code (\$)	Fee Description
103 18	203 9	Claims in excess of 20		
102 84	202 42	Independent claims in excess of 3		
104 280	204 140	Multiple dependent claim, if not paid		
109 84	209 42	** Reissue independent claims over original patent		
110 18	210 9	** Reissue claims in excess of 20 and over original patent		
SUBTOTAL (2)				\$27.00

**or number previously paid, if greater; For Reissues, see above

3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
105 130	205 65	Surcharge - late filing fee or oath			
127 50	227 25	Surcharge - late provisional filing fee or cover sheet			
139 130	139 130	Non - English specification			
147 2,520	147 2,520	For filing a request for ex parte reexamination			
112 920*	112 920*	Requesting publication of SIR prior to Examiner action			
113 1,840*	113 1,840*	Requesting publication of SIR after Examiner action			
115 110	215 55	Extension for reply within first month			
116 400	216 200	Extension for reply within second month			
117 920	217 460	Extension for reply within third month			
118 1,440	218 720	Extension for reply within fourth month			
128 1,960	228 980	Extension for reply within fifth month			
119 320	219 160	Notice of Appeal			
120 320	220 160	Filing a brief in support of an appeal			
121 280	221 140	Request for oral hearing			
138 1,510	138 1,510	Petition to institute a public use proceeding			
140 110	240 55	Petition to revive - unavoidable			
141 1,280	241 640	Petition to revive - unintentional			
142 1,280	242 640	Utility issue fee (or reissue)			
143 460	243 230	Design issue fee			
144 620	244 310	Plant issue fee			
122 130	122 130	Petitions to the Commissioner			
123 50	123 50	Processing fee under 37 CFR § 1.17(q)			
126 180	126 180	Submission of Information Disclosure Statement			
581 40	581 40	Recording each patent assignment per property (times number of properties)			
146 740	246 370	Filing a submission after final rejection (37 CFR § 1.129(a))			
149 740	249 370	For each additional invention to be examined (37 CFR § 1.129(b))			
179 740	279 370	Request for Continued Examination (RCE)			
169 900	169 900	Request for expedited examination of a design application			
Other fee (specify) _____					
SUBTOTAL (3)					

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3)

SUBMITTED BY

Complete (if applicable)

Name (Print/Type)	Daniel M. Gurfinkel	Registration No. (Attorney/Agent)	34,177	Telephone	312-655-1500
Signature				Date	2/26/02

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Date of Deposit: February 26, 2002

I hereby certify that this paper is being deposited with the United States Postal Service "Express Mail" Post Office to Addressee. Service under 37 CFR 1.10 is on the date indicated above and addressed to: Commissioner for Patents, Attn.: Box Patent Application, Washington, D.C. 20231. The person mailing this paper is:

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